FATENT 362



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Marilyn R. Khorsemoh' Marilyn R. Khorsandi

Applicant

David Allison Bennett, et al.

Application No.

09/685,078

Filed

October 6, 2000

Title

APPARATUS, SYSTEMS AND METHODS FOR ONLINE, MULTI-CARRIER, MULTI-SERVICE PARCEL SHIPPING MANAGEMENT FEATURING NOTIFICATION SERVICE

OPTION COMPARISON FOR MULTIPLE CARRIERS

Grp./Div.

3629

Examiner Docket No.

Jamiesue A. Webb

PSTM0010/MRK/STM

TRANSMITTAL LETTER

Mail Stop Amendment Commissioner For Patents P.O. Box 1450 Alexandria, VA 22313-1450 140 S. Lake Ave., Suite 312 Pasadena, CA 91101 December 1, 2005

Commissioner:

Attached are the following:

- 1. Fee Transmittal (in duplicate);
- 2. Check No. 2026 for Extension Fee and IDS for \$300;
- 3. Petition for Extension of Time for one (1) month (in duplicate);
- 4. Amendment and Response to Office Action dated August 1, 2005 (with amendments to existing claims only -- resulting in no additional claim fees);
- 5. Supplemental Information Disclosure Statement, PTO Form 1449, and 15 Cited References; and
- 6. Return Post Card

The Commissioner is hereby authorized to charge any fees under 37 CFR 1.16 and 1.17 which may be required during the **pendency** of this application to Deposit Account No. 501574. Please show our docket number with any charge or credit to our Deposit Account. **A copy of this letter is enclosed**.

Respectfully submitted,

KHORSANDI PATENT LAW GROUP, ALC

Marilyn R. Khorsandi

Reg. No. 45,744 Customer No. 29524

626/796-2856

MRK/aa Enclosures

PTO/SB/17 (12-04)
Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the I			5, no persons are require	d to respond to	a collection of infon			lid OMB contro	ol number.
570ABEM 12/8/2004							Complete if Known		
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).					ation Number	09/685	09/685,078		
FEE TRANSMITTAL					ate	Octobe	October 6, 2000		
					med Inventor	David A	David Allison Bennett, et al.		
For FY 2005					er Name	Jamisu	Jamisue A. Webb		
Applicant Claims small entity status. See 37 CFR 1.27					it	3629	3629		
TOTAL AMOUNT OF PAYMENT (\$) 300.00					v Docket No.	PSTMC	PSTM0010/MRK		
METHOD OF PAYMENT (check all that apply)									
X Check Credit Card Money Order Other (please identify):									
X Deposit Account Deposit Account Number: 501574 Deposit Account Name: Khorsandi Patent Law Group, ALC									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
Charge fee(s) indicated below Charges fee(s) indicated below, except for the filing fee									
X Charge any additional fee(s) or underpayments of fee(s)									
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and publication on PTO 2029									
authorization on PTO-2038. FEE CALCULATION									
1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES									
Small or Large Entity Small or Large Entity Small or Large Entity									
Application Type	Fee (\$)	Fee (\$)	, <u>Fee (\$) </u>	<u>e (\$)</u>	Fee (\$)	Fee (\$)		Fees Paid (\$	_
Utility	300	150	500	250	200	100		\$.	00_
Design	200	100	100	50	130	65			
Plant	200	100	300	150	160	80			
Reissue	300	150	500	250	600	300			_
Provisional	200	100	0	0	0	0	_		 .
2. EXCESS CLAIM FEES Large Entity									
Fee Description Fee (\$) Fee (\$)									
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25									
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100									
Multiple dependen	t claims					-	30	60 180)
Total Claims	Extra Claim	<u>s</u>	Fee (\$) Fee	e Paid (\$)	<u> </u>	Multiple D	ependent Clain		ľ
- or		x	\$50.00 =	\$ 00.00		<u>Fee (\$</u>	<u>Fee F</u>	Paid (\$)	
HP = highest number of t	otal claims paid for, if g	reater than 2	20			\$0.	.00_		
Indep. Claims	Extra Claim	<u>s</u>	Fee (\$) Fee	e Paid (\$)					
orl	HP =	_ x	\$200.00 =	\$ 0.00					
HP = highest number of i	ndependent daims pai	d for, if great	er than 3						
3. APPLICATION									
			sheets of paper, the					entity)	
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$)									
100 - 100 = 0 / 50 = 0 (round up to a whole number) x \$250.00 = \$0.00									
4. OTHER FEE(S) Fees Paid(\$)									
Non-English S	-	\$130 fee	(no small entity dis	count)					
Other: Supplemental IDS 180.00									
Petition for 1-Month Extension of Time 120.00									
SUBMITTED BY									
Signature	Marlin	R. Kh		ration No.	45744		Telephone	(626) 796-2	2856
Name (Print/Type)	Marilyn R. Khors	sandi	- 1	<u></u> ,			Date Dece	mber 1,	2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.